

**COMBINED AMENDMENT & PETITION FOR EXTENSION OF  
TIME UNDER 37 CFR 1.136(a) (Large Entity)**

Docket No.  
**18896**

In Re Application Of: **Kirby Siemering, et al.**

Application No. <b>10/535,434</b>	Filing Date <b>September 14, 2006</b>	Examiner <b>Katherine D. Salmon</b>	Customer No. <b>23389</b>	Group Art Unit <b>1634</b>	Confirmation No. <b>6151</b>
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Invention: **GENOTYPING OF DEAFNESS BY OLIGONUCLEOTIDE MICROARRAY ANALYSIS**

**COMMISSIONER FOR PATENTS:**

This is a combined amendment and petition under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of April 24, 2008 in the above-identified application.

*Date*

The requested extension is as follows (check time period desired):

One month       Two months       Three months       Four months       Five months

from: May 24, 2008      *Date*      until: September 24, 2008      *Date*

The fee for the amendment and extension of time has been calculated as shown below:

**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	28 -	24 =	4	x \$50.00	\$200.00
INDEP. CLAIMS	6 -	5 =	1	x \$210.00	\$210.00
<b>FEE FOR AMENDMENT</b>					<b>\$410.00</b>
<b>FEE FOR EXTENSION OF TIME</b>					<b>\$1,640.00</b>
<b>TOTAL FEE FOR AMENDMENT AND EXTENSION OF TIME</b>					<b>\$2,050.00</b>

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The fee for the amendment and extension of time is to be paid as follows:

- A check in the amount of \_\_\_\_\_ for the amendment and extension of time is enclosed.
- Please charge Deposit Account No. **19-1013/SSMP** in the amount of **\$2,050.00**
- The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **19-1013/SSMP**
- Any additional filing fees required under 37 C.F.R. 1.16.
  - Any patent application processing fees under 37 CFR 1.17.
- If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. **19-1013/SSMP**.
- Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**



*Signature*

**Dated: September 19, 2008**

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____.	
(Date)	
_____ Signature of Person Mailing Correspondence	
_____ Typed or Printed Name of Person Mailing Correspondence	